05-05

PTO/SB/30 (01-03)

Approved for use through 04/30/2003. OMB 0651-0031

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## Request For

## Continued Examination (RCE) **Transmittal**

Address to: Commissioner for Patents **Box RCE** Washington, DC 20231

ed to respond to a collection of informa	ation unless it contains a valid OMB control number.
Application Number	09/517,127
Filing Date	3/2/2000
First Named Inventor	Moore et al.
Art Unit	3723
Examiner Name	T. Eley
Attorney Docket Number	MI22-1246

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114
a. Previously submitted
i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on(Any unentered amendment(s) referred to above will be entered).
li. Consider the arguments in the Appeal Brief or Rely Brief previously filed on
lii. Other
b. Enclosed EV 5 4 9 5 7 2 0 16
I. Amendment/Reply iii. Information Disclosure Statement (IDS)
ii. Affidavit(s)/ Declaration(s) iv. Other Form PTO-1449;
2. Miscellaneous
Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a
a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
b. Other Return Receipt Postcard
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
The Director is hereby authorized to charge The Director is hereby
a. Line Deposit Account No. 23-0925
i. RCE fee required under 37 CFR 1.17(e)
O1 FC:1801 790.00 OP
ii. Extension of time fee (37 CFR 1.136 and 1.17)
iii. Other
b. Check in the amount of \$ 790.00enclosed
c. Payment by credit card (Form PTO-2038 enclosed)
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
be included on this form. Provide credit card information and authorization on P10-2006.
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED
Name (Print/Type) James D. Shaurette Registration No. (Attomey/Agent) 39,833  Signature Date 72,65
3/0/03
CERTIFICATE OF MAILING OR TRANSMISSION  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as . Corporation in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.
Name (Print/Type) Jim Tidrick
Signature Date 5.3-05
Page I of 2  This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTC)

This collection of Information is required by 37 CFR 1.14. The information is required to but an of retain a behicit by the public which is to line (and by the OsP10 to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box RCE, Washington, DC 20231.

MAY 0 3 2005 C

Effective on 12/08/2004. Int to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

OTAL AMOUNT OF PAYMENT	(\$)	790.00
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Complete if Known						
Application Number	09/517,127					
Filing Date	March 2, 2000					
First Named Inventor	Scott E Moore et al.					
Examiner Name	T. Eley					
Art Unit	3724					
Attorney Docket No.	MI22-1246					

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 23-0925  Deposit Account Name: Wells St. John, P.S.							
For the above-identi	fied deposit	account, the Direct	or is hereby	authorized to:	(check all th	at apply)	
Charge fee(s)	) indicated be	elow		Charge	e fee(s) indic	ated helow ex	cept for the filing fee
Charge any a	dditional fee	(s) or underpaymer	nts of fee(s	, 🚍 🎽	` ,	•	sept for the ining too
under 37 CFF	R 1.16 and 1.	.17		L Groun	any overpay		
WARNING: Information on this information and authorization			card inform	nation should no	t be included	on this form. P	rovide credit card
FEE CALCULATION							
1. BASIC FILING, SEAF	CH AND	EYAMINATION I	FES			<u></u>	- "
i. BASIC I ILING, CLAI	FILING		SEARCH	I FEES	EXAMINA	TION FEES	
Application Type	Fee (\$)	mall Entity	Fee (\$)	mall Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	<u>Fee (\$)</u> 150	500	Fee (\$) 250	200	Fee (\$) 100	recording (4)
<b>,</b>	200				130		
Design		100	100	50		65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	$\Delta^0$ =	¬° 0 0	<b>4</b> 0	0	
Provisional 200 100 EV 5 4 9 5 7 2 0 1 6					Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)					200	100	
Multiple dependent claims					360	180	
Total Claims						ependent Claims	
20 or HP = HP = highest number of total			=			<u>Fee (\$)</u>	Fee Paid (\$)
Indep. Claims  - 3 or HP =	Extra Clain	_	Fee Pa	id (\$)			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE	FEE	1100 1	c				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = / 50 = (round <b>up</b> to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)					Fees Paid (\$)		
Other (e.g., late filing	g surcharge	): <u>Request for Cont</u>	inued Exar	nination			\$790.00

SUBMITTED BY					
Signature	120	DA-	Registration No. (Attorney/Agent) 39,833	Telephone 509-624-4276	
Name (Print/Type)	James D. Shaurette	- 4		Date 5/2/05	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.